

**CLAIMS ONLY**

Application Number

Filing Date

Applicant(s)

~~update~~

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2	1						52					
3	1						53					
4	1						64					
5							65					
6	1						66					
7	1						67					
8	1						58					
9	1						69					
10	1						60					
11	1						61					
12		10					62					
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42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	10						Total Indep					
Total Depend	92						Total Depend					
Total Claims	102						Total Claims					